

BRP WS 29 Chemical Addition Retrofit

for systems that serve more than 3,300 people Instructions and Supporting Materials

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Introduction

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at mass.gov/dep in two file formats: Microsoft Word and Adobe Acrobat PDF . Either format allows documents to be printed.

Instructions & Support Materials files in Microsoft Word format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

Permit Applications in Microsoft Word format must be downloaded separately. Users with Microsoft Word 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



BRP WS 29 Chemical Addition Retrofit

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Permit Fact Sheet

1. What is the purpose of this permit?

This permit serves to protect the public's health and welfare by insuring that minimum drinking water requirements are met in the chemical addition retrofit of water systems. It consists of an approval for chemical addition retrofit of water systems, for systems that serve more than 3,300 people. For systems that serve less than or equal to 3,300 people, apply for BRP WS 34. Legislative authority is stated in MGL Chapter 111 s. 160A et al. Regulatory authority is stated in 310 CMR 22.04 of the Drinking Water Regulations.

2. Who must apply?

Public water suppliers that serve more than 3,300 people or their representatives who want approval for the chemical addition retrofit of their water system.

3. What other requirements should be considered when applying for this permit?

If the water supplier or their representatives apply for this permit it may also be necessary for them to apply for other DEP water treatment permits, e.g. BRP WS 23 or BRP WS 24.

Note: These additional requirements are intended to serve as a guide to the applicant. It does not necessarily include all additional requirements.

4. What is the application fee?

The application fee is \$575.

5. What is the Primary Permit Location? What is the Reserve Copy Location?

PRIMARY PERMIT LOCATION

Department of Environmental Protection

**Regional Office

RESERVE COPY LOCATION

None Required.

Water Supply

6. What are the timelines?

As of July 1, 1992 the timelines are:

AC T1 T2* BRP WS 29 30 60 60

There is no public comment period for this permit.

7. What is the annual compliance fee?

There is no annual compliance assurance fee for this permit.

^{*}See "Addresses and Phone Numbers" page included in this package.

^{*}A second technical review will only be conducted if necessary.



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Permit Fact Sheet

8. How long is this permit in effect?

This permit is in effect as long as the applicant remains in compliance with appropriate laws and regulations and the Department determines that the product or operations continue to protect the public health and welfare.

- 9. How can I avoid the most common mistakes made in applying for this permit?
 - a. Fill in all information on the DEP Application Form BRP WS Application.
 - b. Attach all information requested on the Application Completeness Checklist.
 - c. Send application and one copy of the DEP Transmittal Form to DEP Regional Office, Water Supply.
 - d. Submit fee and one copy of the DEP Transmittal Form to: Department of Environmental Protection, P.O. Box 4062, Boston, MA 02211.
- 10. What are the regulations that apply to this permit? Where can I get copies?

These regulations include, but are not limited to:

- a. Drinking Water Regulations, 310 CMR 22.00.
- b. Timely Action and Fee Provisions, 310 CMR 4.00.

These may be purchased at:

State House Bookstore Room 116 Boston, MA 02133 617-727-2834 State House West Bookstore 436 Dwight Street Springfield, MA 01103 413-784-1376



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Application Completeness Checklist

	The DEP Transmittal Form is completed.
	Form BRP WS Application is completed.
	A cover letter explaining the request is attached.
	Documentation to support the request.
	A DEP application for chemical addition retrofit.
	A Massachusetts Professional Engineer's Certification and dated stamp.
То	submit the application package:
	Checklist items have been completed.
	Send two copies of the application along with one copy of the DEP Transmittal Form to:
	Department of Environmental Protection* Regional Office Water Supply *See "Addresses and Phone Numbers" page included in this package.
	Send fee of \$575 in the form of check or money order made payable to <i>Commonwealth of Massachusetts</i> , along with one copy of the DEP Transmittal Form to:
	Department of Environmental Protection P.O. Box 4062

Boston, MA 02211

Massachusetts Department of Environmental Protection



Addresses and Phone Numbers

DEP Boston One Winter Street Boston, MA 02108 Telephone: (617) 292-5500 Fax: (617) 556-1049 TDD: (617) 574-6868

William X. Wall Experiment Station 37 Shattuck Street Lawrence, MA 01843 Fax: (978) 688-0352

Division of Environmental Analysis Telephone: (978) 682-5237 Air Quality Surveillance

Telephone: (978) 975-1138

Division of Watershed Management

627 Main Street Worcester, MA 01608

Telephone: (508) 792-7470

Fax: (508) 791-4131

DEP Western Region 436 Dwight Street Suite 402 Springfield, MA 01103

Phone: (413) 784-1100 Fax: (413) 784-1149



Agawam Alford Amherst Ashfield Becket Belchertown Bernardston Blandford Brimfield Buckland Charlemont Cheshire Chester Chesterfield

Chicopee Clarksburg

Conway Cummington Dalton Deerfield Easthampton East Longmeadow Egremont Erving Florida Goshen Granby Granville Great Barrington Greenfield Hadley

Hampden Hancock Hatfield Hawley Heath Hinsdale Holland Holyoke Huntington Lanesborough Lee Lenox Leverett Leyden Longmeadow Ludlow Middlefield

Montague Monterey Montgomery Monson Mount Washington New Ashford New Marlborough New Salem North Adams Northampton Northfield Orange Otis Palmer Pelham Peru

Pittsfield Plainfield Richmond Rowe Russell Sandisfield Savoy Sheffield Shelburne Shutesbury Southampton South Hadley Southwick Springfield Stockbridge Sunderland Tolland

Tyringham Wales Ware Warwick Washington Wendell Westfield Westhampton West Springfield West Stockbridge Whately Wilbraham Williamsburg Williamstown Windsor Worthington

DEP Central Region 627 Main Street Worcester, MA 01608 Phone: (508) 792-7650 Fax: (508) 792-7621 TDD: (508) 767-2788



Acton Ashburnham Ashby Athol Auburn Ayer Barre Bellingham Berlin Blackstone Bolton Boxborough Boylston Brookfield

Charlton Clinton Douglas Dudley Dunstable East Brookfield Fitchburg Gardner Grafton Groton Harvard Hardwick Holden Hopedale

Hopkinton Hubbardston Hudson Holliston Lancaste Leicester Leominster Littleton Lunenbura Marlborough Maynard Medway Mendon Milford

Milibury Millville New Braintree Northborough Northbridge North Brookfield Oakham Oxford Paxton Pepperell Petersham Phillipston

Rovalston

Rutland Shirley Shrewsbury Southborough Southbridge Spencer Sterling Stow Sturbridge Sutton Templeton Townsend Tyngsborough

Uxbridge Warren Webster Westborough West Boylston West Brookfield Westford Westminster Winchendon Worcester

DEP Southeast Region 20 Riverside Drive Lakeville, MA 02347 Phone: (508) 946-2700 Fax: (508) 947-6557 TDD: (508) 946-2795



Abinator Acushnet Attleboro Avon Barnstable Berkley Bourne Brewster Bridgewater Brockton Carver Chatham

Chilmark

Dennis Dighton Duxburv Eastham East Bridgewater Easton Edgartown Fairhaven Fall River Falmouth Foxborough Franklin

Dartmout

Gay Head Gosnold Halifax Hanover Hanson Harwich Kingston Lakeville Mansfield Marion Marshfield Mashpee

Holbrook

Middleborough Nantucket New Bedford North Attleborough Norton Norwell Oak Bluffs Orleans Pembroke Plainville Plymouth

Plympton

Raynham Rehoboth Rochester Rockland Sandwich Scituate Seekonk Sharon Somerset Stoughton Swansea Taunton

Tisbur Truro Wareham Wellfleet West Bridgewater Westport West Tisbury Whitman Wrentham Yarmouth

DEP Northeast Region One Winter Street Boston, MA 02108 Telephone: (617) 654-6500 Fax: (617) 556-1049 TDD: (617) 574-6868



Andover Arlington Ashland Bedford Relmont Beverly Billerica Boston Boxford Braintree Brookline Burlington Cambridge Canton

Carlisle

Chelsea Cohasset Concord Danvers Dedham Dover Dracut Essex Everett Framingham Georgetown Gloucester Groveland Hamilton Haverhill

Hull Ipswich . Lawrence Lexington Lincoln Lowell Lvnn Lynnfield Malden Manchester-By-The-Sea Marblehead Medfield Medford Melrose

Methuen Middleton Millis Milton Nahant Natick Needham Newbury Newburyport Newton Norfolk North Andover North Reading

Norwood Peabody

Randolph Reading Revere Rockport Rowley Salem Salisbury Saugus Sherborn Somerville Stoneham Sudbury Swampscott Tewksbury

Topsfield

Walpole Waltham Watertown Wayland Wellesley Wenham West Newbury Weston Westwood Weymouth Wilmington Winchester Winthrop Woburn



Massachusetts Department of Environmental Protection Bureau of Resource Protection – Drinking Water Program

BRP WS Application

	 		-	

Transmittal Number

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return





Fo	r W	/ate	er Supply	/ Permits or A _l	pprovals			Facility ID# (if known)
A. 1. 2.	ls tl	-		r an □ Original or a	Resubmit	ital?		
	Nan	ne				Ado	ress	
	City	,		State	Zip	Cor	tact	Telephone
3.	Cor	nsult	ant:					
	Nan	ne				Add	ress	
	City	'		State	Zip	Cor	tact	Telephone
В.	Pe	erm	nit					
app Unde Zone Cros: New	lying ergrou	nd In BRF etermine BRF Delin BRF field BRF field BRF	jection Control WS 06 Undergonation for Existic WS 07 Approva- neation WS 08 Approva- Development WS 09 Plan A WS 11 Minor I test required Drinking Water Cross Connec Water Vending Other(specify) WS 12 Major I ng is required WS 27 New T- WS 28 Vendin WS 30 Vendin WS 30 Vendin WS 31 Vendin	ral to Conduct Pump Test ral of Zone II Delineation pproval New Technology Approval r Additive tion Device g Machine New Technology Approval echnology with Third-party g Site/Source Prototype g Site Approval g and POU/POE Devices	egistration for Zone II ; where no : where field / Approval	New Sour	Survey and App BRP WS 15 Pu Construct Sourvey BRP WS 17 Ex Survey BRP WS 18 To BRP WS 19 Pu BRP WS 20 To atment Approvals BRP WS 21 To BRP WS 22 Pil BRP WS 25 Tre BRP WS 25 Tre BRP WS 25 Tre BRP WS 33 Dis BRP WS 33 Dis BRP WS 34 Water Systems BRP WS 36 Sa BRP WS 36 Sa BRP WS 36 Sa BRP WS 36 Ab	ploratory Phase, Site Examination, Land Use proval to Conduct Pumping Test mping Test Report Approval and Approval to Ce gmaphoratory Phase, Site Examination & Land Use Conduct Pumping Test ploratory Phase, Site Examination & Land Use Conduct Pumping Test Construct Source Conduct Pilot Study of Study Report Construct Facility 1 mgd Construct Facility 1 mgd Construct Facility 1 mgd Construct Facility Modification Retrofits of 3,300 people Stribution Modifications < 3,300 people Stribution Modifications < 3,300 people Stribution Modification Setrofits of < 3,300 people Stribution Modification Setrofits of < 3,300 people Stribution Modifications < 3,400 people
Ċ.	"I ce atta acce pers sub who resp	ertify, chme ordar sonne mitte mar oonsi	ents were prepace with a systel properly gated. Based on nage the systelle for gatherical control or the system of the sy	y of law, that this applic pared under my superv tem designed to ensur thered and evaluated the my inquiry of the persor em, or those persons d the information sub-	rision, in e that qualified he information n or persons irectly mitted in this	Aut	t Name norized Signatu ition/Title	ıre

knowledge and belief, true, accurate and complete."

Print Name	
Authorized Signature	
Authorized Signature	
Position/Title	
Date	



BRP WS 29 Chemical Addition Retrofit

Application for Approval for Treatment of Public Water Supply Systems That Serve More Than 3,300 People

Transmittal Number
Facility ID# (if known)

A. Water Supply Information

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return



key

Note: Treatment of public water supply may be adopted, modified, or discontinued only with the approval of the Department of Environmental Protection.

1.	Name of Applicant – Board of Water Commissioners or similar body:
2.	PWS I.D.#:
3.	City or Town:
4.	Total population served by system (estimate if necessary):
5.	Other City, Town, District, Institution or Area Served:
6.	PWS I.D.#:

B. Treatment Information

Sources of Water Supply to be treated: ii. İ۷.

Treatment Type (See list A below):

Treatment Type Code Number

4. Chemicals to be used:

Treatment Processes (See list B below):

List A - Treatment Type

Disinfection By-Product Control Corrosion Control Disinfection Dechlorination Iron Removal Inorganic Removal Fluoridation Manganese Removal Organic Removal Particulate Removal Radionuclides Removal Softening Taste/Odor Control

List B - Treatment Processes and Code Numbers

100 Activated Alumina 121 Activated Carbon (Granular) 125 Activated Carbon (Powder) 160 Algae Control 180 Bone Char 200 Chloramines 220 Chlorine Dioxide 240 Coagulation 300 Distillation 320 Electrodialysis

401 Gas. Chlorination - Post

360 Flocculation

380 Fluoridation

423 Hypochlorination - Pre 441 Inhibitor - Bimetalic Phosphate 443 Inhibitor - Hexametahosphate 445 Inhibitor - Ortophosphate 447 Inhibitor - Polyphosphate 449 Inhibitor - Silicate 460 Ion Exchange 500 Lime - Soda Ash Addition 520 Microscreening 560 Permaganate 580 Peroxide

403 Gas. Chlorination - Pre

421 Hypochlorination - Post

600 Rapid mix 620 Reducing Agents 623 Reducing Agents - Sodium Bisulfate 625 Reducing Agents - Sodium Sulfite 627 Reducing Agents - Sulfur Dioxide 640 Reverse Osmosis 660 Sedimentation 680 Sequestration 700 Sludge Treatment

720 Ultraviolet Radiation 740 pH Adjustment 741 pH Adjustment - Post 742 pH Adjustment - Pre



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Transmittal Number	
Facility ID# (if known)	

C. Feed Points				
	Feed Point #1		Feed Point	#2
Feed Point(s):			_	
Type of Feed Equipment:				
Flow Rate (GPM):		-	_	
Water Pressure:	Max	Min	Max	Min
Feeder Capacity	Max	Min	Max	Min
(Gal/24 hr or lbs/24 hr):	Max	Min	Max	Min
D. Designer				
Design Engineer:				
2. Massachusetts Registr	ration Number:			
E. Certificate The undersigned certify that the state of	ho troatment facility will b	0		
operated under the supervision Section F (or designated alter	on of the person named in			
responsible charge of the ope instructions and requirements	ration, will comply with	Name		
Environmental Protection, inc maintenance of equipment, re	luding those pertaining to	Title		
performance of routine tests a samples.	and submission of routine	Signature		
It is understood that any chan Sections F or G must be repo the Department of Environme	rted promptly in writing to	Date		
F. Employee in Re	esponsible Cha	rge of Trea	tment Facil	lity
Name		Title		
Certified Operator License N	lumber	Grade		
Signature		Date		



BRP WS 29 Chemical Addition Retrofit

Application for Approval for Treatment of Public Water Supply Systems That Serve More Than 3,300 People

Transmittal Number
Facility ID# (if known)

Linployee	ii itesponsible ei	harge of Treatment Facility (cont.)
Office Address a	and Telephone:	
Street Address		City/Town
State	Zip Code	Office Telephone Number (including extension)
Home Address a	and Telephone:	
Street Address		City/Town
State	Zip Code	Home Telephone Number
. Alternate E	Employee in Resp	onsible Charge of Treatment Facility
Name		Title
Name		Title
Name Certified Operator Li	cense Number	Title
Name Certified Operator Li Signature	cense Number	Title
Name Certified Operator Li Signature Office Address a	cense Number	Title Grade Date
Name Certified Operator Li Signature Office Address a Street Address	and Telephone:	Title Grade Date City/Town
Name Certified Operator Li Signature Office Address a Street Address State	and Telephone:	Title Grade Date City/Town

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